

## **Invoice**

7/5/2016

604 W. Franklin Street Boise, ID 83702 208-258-8139

Comanche County Memorial Hospital

Invoice #: 1440

Terms: Net 30

Rate	Quantity	Amount
104,577.05	1	104,577.05
		104,577.05
-90.00%		104,577.05 -94,119.35
	104,577.05	104,577.05

**Total Invoice** 

\$10,457.70